

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 23 PM 3: 23

DOCUMENT # P92000010880 (2)

1. Corporation Name
DAVRON MARKETING, INC.

Principal Place of Business
**5523 GREYSON ST.
PALM HARBOR FL 34685**

Mailing Address
**5523 GREYSON ST.
PALM HARBOR FL 34685**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

29. Country

3. Date Incorporated or Qualified

12/10/1992

3a. Date of Last Report

02/28/1994

4. FEI Number

59-3161388

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199 (32),
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**GEORGES, RICHARD M
3656 FIRST AVENUE NORTH
ST. PETERSBURG FL 33713**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed (name of registered agent and title if applicable)

Signature typed or printed (name of registered agent and title if applicable)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	HARVEY, DAVID B
STREET ADDRESS	5523 GREYSON STREET
CITY, ST, ZIP	PALM HARBOR FL
TITLE	VP
NAME	FRANCES, DAVID
STREET ADDRESS	5523 GREYSON STREET
CITY, ST, ZIP	PALM HARBOR FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11. TITLE		☐ Change ☐ Addition
12. NAME		
13. STREET ADDRESS		
14. CITY, ST, ZIP		
21. TITLE		☐ Change ☐ Addition
22. NAME		
23. STREET ADDRESS		
24. CITY, ST, ZIP		
31. TITLE		☐ Change ☐ Addition
32. NAME		
33. STREET ADDRESS		
34. CITY, ST, ZIP		
41. TITLE		☐ Change ☐ Addition
42. NAME		
43. STREET ADDRESS		
44. CITY, ST, ZIP		
51. TITLE		☐ Change ☐ Addition
52. NAME		
53. STREET ADDRESS		
54. CITY, ST, ZIP		
61. TITLE		☐ Change ☐ Addition
62. NAME		
63. STREET ADDRESS		
64. CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(2)(b), Florida Statutes. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report, as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with this report.

SIGNATURE: *Francis David*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

✓/2/95 (613) 787-6633